

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective January 1, 2003

Application or Docket Number

0672559

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 9            |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 9 minus 20 = | -                        |
| INDEPENDENT CLAIMS               | 3 minus 3 =  | -1                       |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 375.00 | OR BASIC FEE | 750.00 |
| X\$ 9=    |        | OR X\$18=    |        |
| X42=      |        | OR X84=      |        |
| +140=     |        | OR +280=     |        |
| TOTAL     | 515    | OR TOTAL     |        |

04/05/03 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |             | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------------|------------------------------------|---------------|
|  | Total                            | Independent |                                    |               |
|  | *                                |             | MINUS                              | = 20 -        |
|  |                                  |             |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |             |                                    |               |

SMALL ENTITY OTHER THAN  
OR SMALL ENTITY

| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 9=           | 0              | OR X\$18=           |                |
| X42=             | 0              | OR X84=             |                |
| +140=            |                | OR +280=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

3/16/06

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |             | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------------|------------------------------------|---------------|
|  | Total                            | Independent |                                    |               |
|  | *                                |             | MINUS                              | = 20 - 0      |
|  |                                  |             |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |             |                                    |               |

| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 9=           | 0              | OR X\$18=           |                |
| X42=             | 0              | OR X84=             |                |
| +140=            |                | OR +280=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |             | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------------|------------------------------------|---------------|
|  | Total                            | Independent |                                    |               |
|  | *                                |             | MINUS                              | = -           |
|  |                                  |             |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |             |                                    |               |

| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 9=           |                | OR X\$18=           |                |
| X42=             |                | OR X84=             |                |
| +140=            |                | OR +280=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

United States Patent and Trademark Office  
- Sales Receipt -

03/21/2006 RLLOYD 00000001 503685 10672559

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